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CONFIRMATION NO. 2424

SERIAL NUMBER 10/796,861	FILING OR 371(c) DATE 03/08/2004 RULE	CLASS 514	GROUP ART UNIT 1616	ATTORNEY DOCKET NO. 1194-375 C2
APPLICANTS Paul Calabresi, Barrington, RI; James Darnowski, Barrington, RI;				
** CONTINUING DATA *****				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 05/28/2004				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials		STATE OR COUNTRY RI	SHEETS DRAWING 6	TOTAL CLAIMS 77
				INDEPENDENT CLAIMS 10
ADDRESS 6449				
TITLE USE OF TAUROLIDINE TO TREAT TUMORS				
FILING FEE RECEIVED 1199	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	

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